

Patient Needs Assessment Survey

Patient ID #: _____

Date: _____

Data Collector ID: _____

Introduction

Hello. I'm **caller**, calling from (name of VA). We are looking at methods to help family members who provide care to persons with (name of condition). Part of this program is a survey we are conducting with caregivers. I would like to ask a few questions of the person who provides the day-to-day care for patient. It will only take a few minutes.

1. Are you the primary care giver, the person who provides most of the day-to-day care, for patient?

Yes	No

2. How many years have you been providing this care for patient?

Years	
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3. What is your age?

Age	
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4. What is your gender?

	Female
	Male

Background

5. What is your relation to patient?

	Wife/Husband
	Daughter/Son
	Daughter-in-law/Son-in-law
	Niece/Nephew
	Sister/Brother
	Close friend
	Hired help
	Other (please specify):

6. Is there at least one other person who also provides a large portion of the day-to-day care for patient?

Yes	No

7. What is their relation to patient?

	Wife/Husband
	Daughter/Son
	Daughter-in-law/Son-in-law
	Niece/Nephew
	Sister/Brother
	Close friend
	Hired help
	Other (please specify):

8. Do you have any other relatives/friends for whom you provide much day-to-day care?

Yes	No

If yes, who:

Technology Profile

9. Do you use a cell phone?	Yes	No
10. Do you use a computer?	Yes	No
11. Do you use an ATM?	Yes	No
12. Do you use a telephone with Caller ID?	Yes	No

13. How would you describe your comfort with learning new technologies? (How did you or would you expect to feel when learning to use such things as computers or cell phones, for example?)

	Very comfortable
	Somewhat comfortable
	Neither comfortable nor uncomfortable
	Somewhat uncomfortable
	Very uncomfortable

Caregiver Resources

How often do you get information about how to be a caregiver, about how to care for your family member/friend, by

14. ...talking with their doctor or nurse	Always	Very often	Fairly many times	Occasionally	None of the time
15. ...reading pamphlets or articles	Always	Very often	Fairly many times	Occasionally	None of the time
16. ...talking with other caregivers	Always	Very often	Fairly many times	Occasionally	None of the time
17. ...finding information on the Internet	Always	Very often	Fairly many times	Occasionally	None of the time
18. ...reading books	Always	Very	Fairly	Occasionally	None of

		often	many times		the time
19. ...calling for recorded information over the telephone	Always	Very often	Fairly many times	Occasionally	None of the time
20. ...support groups	Always	Very often	Fairly many times	Occasionally	None of the time
21....other resources (please specify)					

Screen-phone Response

We are investigating the use of special (device) that (explain what it does)

22. Do you expect that you would find learning to use this device to be

<input type="checkbox"/> Very easy	<input type="checkbox"/> Easy	<input type="checkbox"/> Neither easy nor difficult	<input type="checkbox"/> Difficult	<input type="checkbox"/> Very difficult
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23. As a way for you to learn more about how to care for people with condition, do you expect that this device would be

<input type="checkbox"/> Of no use	<input type="checkbox"/> Not very useful	<input type="checkbox"/> Of use	<input type="checkbox"/> Of considerable use	<input type="checkbox"/> Extremely useful
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24. How often do you expect you would need help using this device to get information?

<input type="checkbox"/> Always	<input type="checkbox"/> Very often	<input type="checkbox"/> Fairly many times	<input type="checkbox"/> Occasionally	<input type="checkbox"/> None of the time
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25. List three additional topics about being a caregiver for a person with condition that you would like to learn more about, e.g., driving, medications, falls, others?

26. Caregiving is often a burden, and is stressful. But it often has rewards. What, in your perception are the rewards.

1. _____
2. _____
3. _____